



# VILLAGE OF JACKSON

"Small Town Living / World Class Technology"

## GENERAL PROJECT APPLICATION

APPLICATION DATE \_\_\_\_\_, 20\_\_\_\_ PERMIT # \_\_\_\_\_ - \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_ Unit #: \_\_\_\_\_ Jackson, WI

### OWNER INFORMATION

Name(s) \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell/Home Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### CONTRACTOR INFORMATION (If owner put "SELF")

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Contact \_\_\_\_\_ Office Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mobile Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

\*WI Contractor Lic. #: \_\_\_\_\_, Exp: \_\_\_\_\_ \*WI Qualifier Lic. #: \_\_\_\_\_, Exp: \_\_\_\_\_

*\*License Information is required for contractors wanting to obtain a permit for work on a 1 or 2 Family Dwelling ONLY*

**\*\*SUBMIT 2 sets of plans for residential and 4 sets of plans for commercial\*\***

### PROJECT INFORMATION

Project Description \_\_\_\_\_

Size of Building (or remodeled area) \_\_\_\_\_

TOTAL Cost of Project \_\_\_\_\_

Cost of Building, HVAC and Labor **ONLY** \_\_\_\_\_

*Do NOT include the cost of plumbing, electrical, landscaping, etc.*

*By signing below, applicant agrees to comply with the applicable requirements of Village of Jackson Code of Ordinances and to obey any and all lawful orders of the Building Inspector and all state laws regarding the construction, alteration, repair, removal and safety of buildings and other structures.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

Permit Fee: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_ CH / CA / CC / RCPT

Mailing Address  
P.O. Box 637

W194 N16660 Eagle Drive  
Jackson, Wisconsin 53037

Phone: (262) 677-9696  
Fax: (262) 677-8770